Only

STATEMENT OF

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FEC FORM 1		_	RGANI				(Office Use O	Only		
1. NAME OF COMMITTEE (ir	full)		(Check if name s changed)		mple:If typing, type	12F	E4M5				
Nikema for	•			000	the intes.				1 1	1 1 1	ı
		1 1 1 1									
ADDRESS (number a	nd street)	PO Box	311913								_
(Check if a is changed	address										
·		Atlanta C	ITY 🛦			GA STAT		131 		L L L	
COMMITTEE'S E-MA	AII ADDR										
(Check if a is changed	address		singer@gmai	il.com							
		Optional	Second E-Mai	I Address							
											╛
COMMITTEE'S WEB (Check if a is changed	address	,	RL) prcongress.com								
2. DATE 1:	M / D	13	y y y 2021								
3. FEC IDENTIFIC	CATION I	NUMBER)	C	C0075258	4						
4. IS THIS STATEM	MENT	NEW	(N) OF	k x	AMENDED (A	A)					
certify that I have e	examined	this Stateme	ent and to the I	best of my l	knowledge and beli	ief it is true,	correct an	d complet	e.		
Type or Print Name	of Treasu	er Jordan,	Richard, Lawton	n, , III							_
Signature of Treasure	er <i>Jore</i>	lan, Richard, I	Lawton, , III		[Electronically Filed]	<i>l</i> Date	M M M	13		y y y 2021	
NOTE: Submission of	false, erro				pject the person sign	-		e penalties	of 2 U.S	S.C. §437] .
Office Use					For further informati Federal Election Com Toll Free 800-424-953	mission			FORM ed 06/2012		_

Toll Free 800-424-9530

Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	
Candid	ate Committee:	
(a) x	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	plete the candidate
Name of Candidate	Williams, Nikema, Natassha, ,	
Candidate	DEM	State
Party Affil	ation DEM Sought: X House Senate President	District 05
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	
(d)		(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Name		i aye 3
Nikema for Con	<u> </u>	La develie BAO Chanca
-	rganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
Nikema Williams House	e Victory Fund	
MA-Ware Addison	430 South Capitol Street SE	
Mailing Address	2nd Floor	
	Washington, DC	20003
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representati	ve Leadership PAC Sponsor
 Custodian of Records: Identi books and records. 	tify by name, address (phone number optional) and position of the per	rson in possession of committee
Winpisinge Full Name	r, Vickie, , ,	
	PO Box 83142	
Mailing Address		
	Gaithersburg	.20883
	Gaithersburg	20003
Title or Position	CITY STATE	ZIP CODE
Compliance	Telephone number	01
3. Treasurer: List the name and any designated agent (e.g., as	I address (phone number optional) of the treasurer of the committee; a ssistant treasurer).	and the name and address of
Full Name Jordan, Ric	chard, Lawton, , III	
Mailing Address	309 Sycamore Street	
	Decatur GA	30030
Title or Position	Decatur GA STATE	30030

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Full Name of Designated Agent	Whie, Adrienne, Annice, ,	
Mailing Address	3324 Marla Blvd	
	Peachtree Corners CITY STATE ZIP	CODE
Title or Position Assistant Treas		
	r Depositories: List all banks or other depositories in which the committee deposits funds, holds accoves or maintains funds.	counts, rents
Name of Bank, I	Depository, etc.	
	Depository, etc. Ameris Bank	
	Depository, etc. Ameris Bank 1220 Cobb Parkway N	
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N	
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N	
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N Marietta DC 20006-1502	
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N Marietta CITY STATE ZIP	
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N Marietta DC 20006-1502 CITY STATE ZIP Depository, etc.	CODE
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N Marietta CITY STATE ZIP Depository, etc. Amalgamated Bank 1825 K St NW	CODE
Name of Bank, I	Depository, etc. Ameris Bank 1220 Cobb Parkway N Marietta CITY STATE ZIP Depository, etc. Amalgamated Bank 1825 K St NW	CODE